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Diagnosis of pemphigoid diseases

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DIAGNOSIS OF PEMPHIGOID DISEASES

1. BP or not BP, that is the question. (*this thesis*)
2. A bulla is not a prerequisite for diagnosis of pemphigoid diseases. (*this thesis*)
3. Single test detection of circulating pemphigoid specific autoantibodies in elderly should be interpreted with care. (*this thesis*)
4. The serological diagnosis of bullous and nonbullous pemphigoid can be made based on indirect immunofluorescence microscopy on salt-split human skin. (*this thesis*)
5. The proposed minimal diagnostic criteria of pemphigoid consist of at least two positive out of three criteria: 1) pruritus and/or predominant cutaneous blisters, 2) positive linear IgG and/or Complement C3 depositions (in n-serrated pattern) along the BMZ by DIF on a skin biopsy, 3) positive epidermal side staining of IgG by IIF SSS on serum. (*this thesis*)
6. Nonbullous pemphigoid is not a white raven in the high-risk population of nursing home residents, and should routinely be screened in those patients with chronic severe pruritus. (*this thesis*)
7. U, nu! (*Joost van den Vondel, 1620*)
8. The u-serrated pattern is a recognizable fingerprint of epidermolysis bullosa acquisita. (*this thesis*)
9. Serration pattern analysis and indirect immunofluorescence microscopy knockout analysis are valuable additional techniques to facilitate the diagnosis of anti-p200 pemphigoid. (*this thesis*)
10. A majority of Dutch dermatologists and residents in dermatology show high adherence to treatment recommendations for bullous pemphigoid by using transcutaneous systemic clobetasol therapy. (*this thesis*)
11. Onder de kleuren welke ons rundvee heeft, zijn de schoonste, de zwartblaarde, de blauw-bonte en de gevlekte witbonte, waarvan ik aan de zwartblaarde, mits dat ze vier witte benen, een halve witte staart en een wit Uijer heeft, de voorkeur geeve. (*Geert Reinders, 1780*)
12. Er gebeurt altijd wat op het wad, zo is het droog, zo is het nat. (*Nico Roelf Meijer*)
13. Joost mag het weten (*onbekend*)